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## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration  
Submitted  
With Initial  
FilingDeclaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

UPN-02811USA

First Named Inventor

Wilson et al

COMPLETE IF KNOWN

Application Number

10/510,947

Filing Date

October 28, 2004

Art Unit

Examiner Name

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CHIMERIC EBOLA VIRUS ENVELOPES AND USES THEREFOR

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

10/28/2004

as United States Application Number or PCT International

Application Number

10/510,947

and was amended on (MM/DD/YYYY)

10/28/2004

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application<br>Number(s) | Country | Foreign Filing Date<br>(MM/DD/YYYY) | Priority<br>Not Claimed  | Certified Copy Attached? |                                     |
|--|---------|-------------------------------------|--------------------------|--------------------------|-------------------------------------|
|  |         |                                     |                          | Yes                      | No                                  |
| PCT/US03/11494                         | PCT     | 04/28/2003                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|  |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
|  |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
|  |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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**DECLARATION — Utility or Design Patent Application**Direct all correspondence to: ☒ Customer Number: 00270 OR ☐ Correspondence address below

Name

Cathy A. Kodroff, Howson and Howson

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Spring House Corporate Center, 321 Norristown Road, Suite 200, Box 457

City

Spring House

State

PA

ZIP

19477

Country

USA

Telephone

215-540-9200

Fax

215-540-5818

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle (if any))

JamesM.

Family Name

or Surname WilsonInventor's  
Signature

Date

11-10-09

Residence: City

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State

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Country

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Citizenship

USA

Mailing Address

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City

Gladwyne

State

PA

ZIP

19035

Country

USA

NAME OF SECOND INVENTOR:

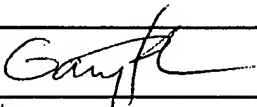
☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle (if any))

Gary

Family Name

or Surname KobingerInventor's  
Signature

Date

11-10-04

Residence: City

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Country

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State

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19146

Country

USA

☒Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet

Page 1 of 1

|  |                  |                        |                       |
|--|------------------|------------------------|-----------------------|
| Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor |                  |                        |                       |
| Given Name (first and middle (if any))   |                  | Family Name or Surname |                       |
| Maria Fe C.  |                  | Medina                 |                       |
| Inventor's Signature   |                  | Date                   |                       |
| Hamilton<br>Residence: City  | Ontario<br>State | CANADA<br>Country CAX  | CANADA<br>Citizenship |
| 100 Main Street East, Apt. 2803<br>Mailing Address   |                  |                        |                       |
| Mailing Address  |                  |                        |                       |
| Hamilton<br>City   | Ontario<br>State | L8N3W7<br>Zip          | CANADA<br>Country     |
| Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor |                  |                        |                       |
| Given Name (first and middle (if any))   |                  | Family Name or Surname |                       |
|  |                  |                        |                       |
| Inventor's Signature   |                  | Date                   |                       |
| Residence: City  | State            | Country                | Citizenship           |
| Mailing Address  |                  |                        |                       |
| Mailing Address  |                  |                        |                       |
| City   | State            | Zip                    | Country               |
| Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor |                  |                        |                       |
| Given Name (first and middle (if any))   |                  | Family Name or Surname |                       |
|  |                  |                        |                       |
| Inventor's Signature   |                  | Date                   |                       |
| Residence: City  | State            | Country                | Citizenship           |
| Mailing Address  |                  |                        |                       |
| Mailing Address  |                  |                        |                       |
| City   | State            | Zip                    | Country               |

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

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Customer No. 00270

UPN-02811USA

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original; first and joint inventor (if plural names are listed below) of the subject matters which is claimed and for which is sought on the invention entitled CHIMERIC EBOLA VIRUS ENVELOPES AND USES THEREFOR, the specification, and preliminary amendments A and B of which

(check one) X are attached hereto  
\_\_\_\_\_ was filed on \_\_\_\_\_ as Application  
No. \_\_\_\_\_ and was amended on \_\_\_\_\_  
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 USC 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

PCT/US03/11494 PCT 04/28/2003  
(Number) (Country) (MM/DD/YYYY filed)

Priority Claimed  
X  
Yes No

I hereby claim the benefit under 35 USC 119(e) of any United States provisional application(s) listed below.

60/376,480  
(Application Number)

04/30/2002  
(Filing Date, MM/DD/YYYY)

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Customer No. 00270

UPN-O2811USA

60/385,704  
(Application Number)

06/04/2002  
(Filing Date, MM/DD/YYYY)

60/427,752  
(Application Number)

11/20/2002  
(Filing Date, MM/DD/YYYY)

I hereby appoint the following attorneys and agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  
STANLEY B. KITA, Registration No. 24,561; GEORGE A. SMITH, JR., Registration No. 24,442; MARY E. BAK, Registration No. 31,215; CATHY A KODROFF, Registration No. 33,980; WILLIAM BAK, Registration No. 37,277; TRACY U. PALOVICH, Registration No. 47,840; and ROBERT J. DUMINIAK, Registration No. 51,636.

Address all telephone calls to Cathy A. Kodroff at telephone no. (215) 540-9210. Address all correspondence to HOWSON AND HOWSON, Spring House Corporate Center, P.O. Box 457, Spring House, Pennsylvania 19477.

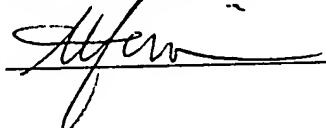
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and believe are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 USC 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor: James M. Wilson

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence: Gladwyne, Pennsylvania  
Citizenship: United States of America  
Post Office Address: 1350 N. Avignon Drive, Gladwyne, PA 19035

Full name of second inventor: Maria Fe C. Medina

Inventor's signature  Oct. 22, 2004  
Date

Residence: Hamilton, Ontario, Canada  
Citizenship: Canada  
Post Office Address: 100 Main Street East; Apt. 2803, L8N3W7, Hamilton, Ontario, Canada

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UPN-O2811USA

Full name of third inventor: Gary Kobinger

Inventor's signature \_\_\_\_\_

\_\_\_\_\_ Date

Residence: Philadelphia, Pennsylvania

Citizenship: Canada

Post Office Address: 2049B Bainbridge Street, Philadelphia, PA 19146